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CONFIRMATION NO. 5040

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.							
10/578,879	03/09/2007	250	2881	1034404-000002							
RULE											
APPLICANTS Steve Arscott, Lille, FRANCE; Severine Le Gac, Ormesson sur Marne, FRANCE; Christian Druon, Villeneuve D'Ascq, FRANCE; Christian Rolando, Lille, FRANCE;											
** CONTINUING DATA ***** This application is a 371 of PCT/FR04/50580 11/10/2004											
** FOREIGN APPLICATIONS ***** FRANCE 0350820 11/12/2003											
** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 07/21/2007											
<table border="1"> <tr> <td> Foreign Priority claimed 35 USC 119(a-d) conditions met Verified and Acknowledged </td> <td> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No /HANWAY CHANG/ Examiner's Signature </td> <td> <input type="checkbox"/> Met after Allowance Initials </td> <td> STATE OR COUNTRY FRANCE </td> <td> SHEETS DRAWINGS 10 </td> <td> TOTAL CLAIMS 18 </td> <td> INDEPENDENT CLAIMS 2 </td> </tr> </table>					Foreign Priority claimed 35 USC 119(a-d) conditions met Verified and Acknowledged	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No /HANWAY CHANG/ Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	STATE OR COUNTRY FRANCE	SHEETS DRAWINGS 10	TOTAL CLAIMS 18	INDEPENDENT CLAIMS 2
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ADDRESS BUCHANAN, INGERSOLL & ROONEY PC POST OFFICE BOX 1404 ALEXANDRIA, VA 22313-1404 UNITED STATES											
TITLE Planar Electronebulization Sources Modeled on a Calligraphy Pen and the Production Thereof											
FILING FEE RECEIVED 1030	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit							